

JAN 24 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application Serial No. 10/629,011
Filing Date July 28, 2003
Confirmation No. 7625
Inventor Trung Tri Doan et al.
Assignee Micron Technology, Inc.
Group Art Unit 2812
Examiner Jennifer M. Kennedy
Attorney's Docket No. MI22-2359
Customer No. 021567
Title Atomic Layer Deposition Methods

RESPONSE TO JANUARY 12, 2005 OFFICE ACTION

To: Mail Stop Amendment
Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

VIA FACSIMILE

From: Mark Matkin (Tel. 509-624-4276; Fax 509-838-3424)
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601 West First Avenue, Suite 1300
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Responsive to the Office Action dated January 12, 2005, Applicant
amends and remarks as follows:

AMENDMENTS

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PTO/SB/21 (09-04)

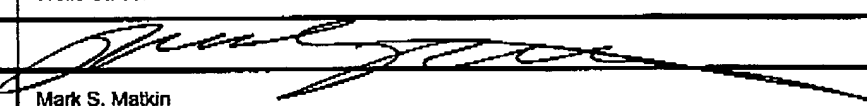
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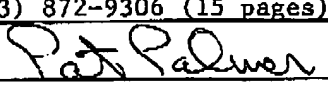
TRANSMITTAL FORM	Application Number	10629,011
	Filing Date	July 28, 2003
	First Named Inventor	Trung Tri Doan
	Art Unit	2812
	Examiner Name	Jennifer M. Kennedy
	Attorney Docket Number	MI22-2359
<small>(to be used for all correspondence after initial filing)</small>		
Total Number of Pages in This Submission		

ENCLOSURES (Check all that apply)				
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment Reply to Office Action dated 01/12/05 <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):		
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">Remarks</td> <td>Customer No. 021567. NO FEE REQUIRED. However, should a fee be deemed owing, please charge same to Deposit Account No. 23-0925.</td> </tr> </table>			Remarks	Customer No. 021567. NO FEE REQUIRED. However, should a fee be deemed owing, please charge same to Deposit Account No. 23-0925.
Remarks	Customer No. 021567. NO FEE REQUIRED. However, should a fee be deemed owing, please charge same to Deposit Account No. 23-0925.			

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Wells St. John P.S.		
Signature			
Printed name	Mark S. Matkin		
Date	1-24-05	Reg. No.	32,268

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